

Central Nervous System Depressants

Alcohol

Barbiturates

Anti-anxiety Tranquilizers

Many Others

Expected Results of Roadside Observations/Indicators of Impairment

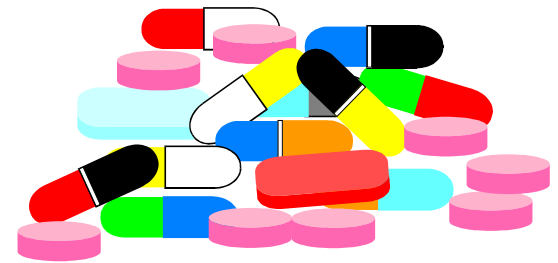
Eye Indicators

- HGN present
- Vertical nystagmus present (with high doses for that individual)
- Pupil size usually will be normal
- Eyelids may be droopy and eyes watery

Methods of Ingestion



Oral



Injection

Indicators of CNS Depressant Impairment

- Drowsiness
- Thick, slurred speech
- Uncoordinated
- Fumbling
- Slow, sluggish reactions

Central Nervous System Stimulants

Cocaine

Amphetamines

Methamphetamine

Expected Results of Roadside Observations/Indicators of Impairment

Psychophysical

- Divided attention impairment
- Starts test too soon
- Accelerated internal clock
- Completes tests quickly
- Rapid and jerky movements

Expected Results of Roadside Observations/Indicators of Impairment

Eye Indicators

- Horizontal or vertical nystagmus - none
- Pupils dilated

Methods of Ingestion

Smoking



Snorting

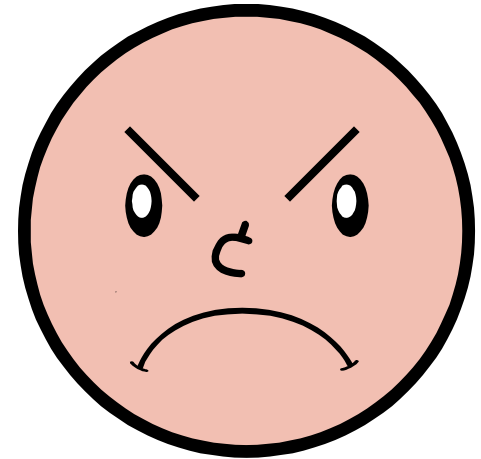


Injecting

Orally

Indicators of CNS Stimulant Impairment

- Restlessness
- Anxiety
- Euphoria
- Talkativeness
- Excitation
- Bruxism
- Body tremors
- Exaggerated reflexes
- Loss of appetite



If subject snorts drug:

- Runny nose
- Redness to nasal area

Hallucination

An hallucination is a sensory experience of something that does not exist outside the mind.

Synesthesia

Transposing of the Senses

- Sounds may be transposed into sights.
- Sights may be transposed into odors



Hallucinogens

- Peyote
- Psilocybin
- LSD
- MDMA (Ecstasy)



Expected Results of Roadside Observations/Indicators of Impairment

Psychophysical

- Uncoordinated
- Severe divided attention impairment
- Poor perception of time and distance
- Poor balance
- Distorted internal clock

Methods of Ingestion



Orally

Smoked



Transdermal Absorption

Injected

Snorted

Indicators of Hallucinogen Impairment

- Dazed appearance
- Body tremors
- Perspiring
- Paranoia
- Disoriented
- Nausea
- Difficulty with speech
- Piloerection
- Statements suggesting hallucinations



Dissociative Anesthetics

- Phencyclidine (PCP)
- Ketamine
- Analogs
- Dextromethorphan (DXM)

Expected Results of Roadside Observations/Indicators of Impairment

Psychophysical

- Divided attention impairment
- Moon walking (PCP)
- Slowed internal clock

Eye Indicators

- Horizontal and vertical nystagmus present
- Pupil size normal
- May have a blank stare

Methods of Ingestion



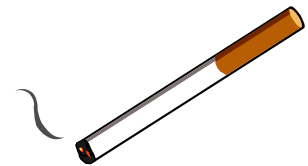
Smoked

Inhaled or “snorted”

Orally

Injected

Transdermal Absorption



Indicators of Dissociative Anesthetic Impairment

- Blank stare
- Loss of memory
- Perspiring heavily
- Warm to touch
- Incomplete, slurred verbal responses
- Cyclic behavior
- Agitated
- Rigid muscle tone
- Disoriented
- Nonresponsive
- Chemical odor (PCP)



Narcotic Analgesics

- Heroin
- Opium
- Morphine
- Codeine
- Dilaudid
- Demerol
- Methadone
- Darvon
- Oxycontin

Expected Results of Roadside Observations/Indicators of Impairment

Psychophysical

- Divided attention impairment
- Poor coordination and balance
- Slowed internal clock

Eye Indicators

- Horizontal and vertical nystagmus will not be present
- Pupil size constricted
- Eyelids will be droopy

Methods of Ingestion

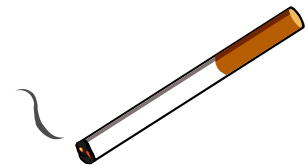


Injected

Smoked

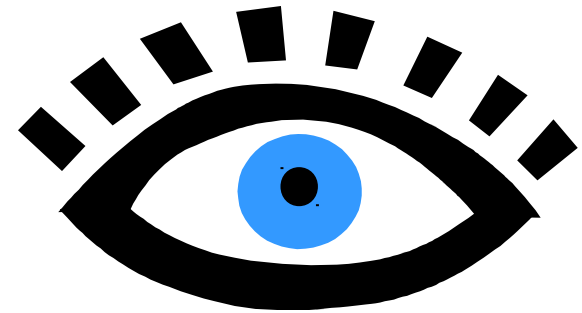
Snorted

Suppositories



Indicators of Narcotic Analgesic Impairment

- “Track marks”
- “On the nod”
- Slowed reflexes
- Low, slow, raspy speech
- Facial itching
- Dry mouth
- Euphoria
- Pupils visibly and obviously constricted
- Flaccid or normal muscle tone



Inhalants



Gasoline

Glues

Paint

Hair Spray

Anesthetic Gases



Possible Roadside Observations/Indicators of Impairment

Psychophysical

- Divided attention impairment
- Poor coordination and balance

Eye Indicators

- HGN will be present
- Vertical nystagmus may be present (with high doses for that individual)
- Pupil size may be normal or dilated

Methods of Ingestion

- Inhaled by breathing fumes
- Ingested from source
- Substances soaked into fabric

Indicators of Inhalant Impairment

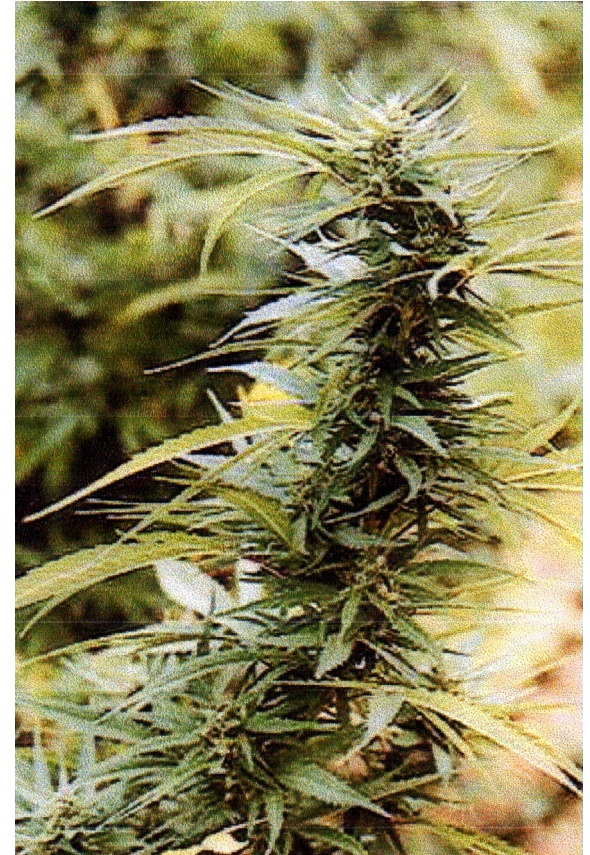
- Odor of the inhaled substance
- Dizziness, numbness
- Possible traces of the substance around the face and nose
- Bloodshot, watery eyes
- Distorted perception of time and distance
- Confused, disoriented appearance

Indicators of Inhalant Impairment

- Light headedness
- Flushed face, possible sweating
- Intense headaches
- Slow, thick, slurred speech
- Nausea
- Non communicative
- Floating sensation

Cannabis

- Marijuana
- Hashish
- Hashish Oil
- Marinol



Expected Roadside Observations/Indicators of Impairment

Psychophysical

- Divided attention impairment
- Poor coordination and balance
- Problems with divided attention tasks
- Distorted internal clock

Eye Indicators

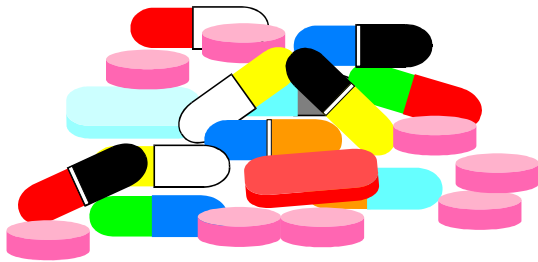
- Horizontal or vertical nystagmus - not present
- Pupil size will be dilated or possibly normal

Methods of Ingestion

Smoking



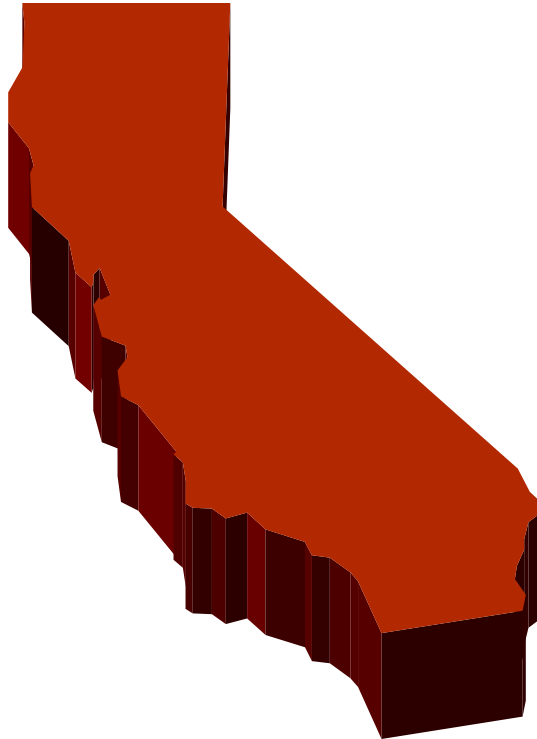
Orally



Indicators of Cannabis Impairment

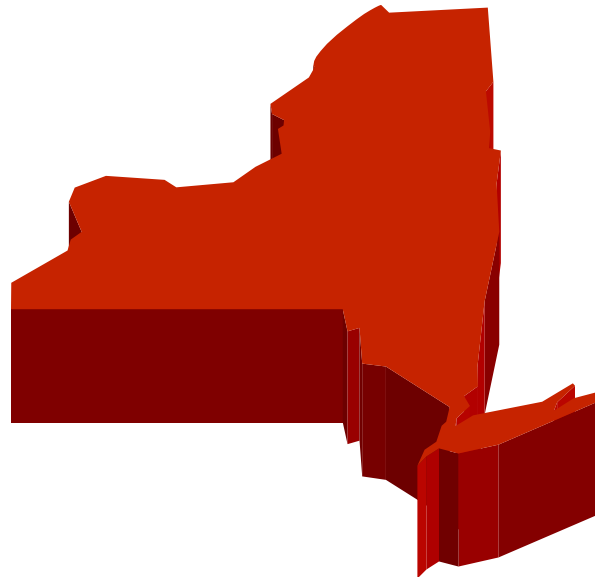
- Odor of marijuana
- Impaired perception of time and distance
- Marked reddening of whites of eyes
- Body tremors
- Disorientation
- Impaired attention
- Relaxed inhibitions

Los Angeles Field Study



72% of suspects had two or more drugs in them

New York Certification Training Study



67% of the suspects evaluated had two or more drug categories other than alcohol

Common Combinations

Cocaine and Cannabis

Cocaine and Heroin

PCP and Cannabis

Scenario I

While checking an interstate rest area, you notice a vehicle parked, engine running, with the driver apparently sleeping. After awakening the driver, who claims she was not sleeping, you notice that her actions are very slow and lethargic. There is no odor of alcoholic beverage on this person's breath and she states she has not been drinking. As you administer the standardized field sobriety tests, you observe that there is no Horizontal Gaze Nystagmus and no Vertical Nystagmus. You also observe that her pupils are extremely small and the eyelids are droopy. As the driver is performing the walk and turn and one leg stand tests, her movements are slow. Administration of the Romberg test disclosed that the subject has a slow internal clock.

Scenario II

On a Saturday evening following a concert, you stop a vehicle for weaving down the street. During the initial conversation with the subject you notice that he is talking very rapidly, has extremely large pupils and is paranoid. The subject states that he was trying to avoid the large snails that were on the road. There is no odor of an alcoholic beverage on this person's breath. As you administer the standardized field sobriety tests, you observe that there is no Horizontal Gaze Nystagmus and no Vertical Nystagmus. As the driver is performing the walk and turn and one leg stand, his movements are fast, then slow, then fast again; and was having difficulty dividing attention. Administration of the Romberg test discloses that the subject has a fast internal clock and goosebumps. After the Romberg test the subject stated that he was confused by the loud noise coming from the Officer's raincoat.

Scenario III

It is August, you arrive on the scene of a serious traffic crash. You notice that the driver is wearing a long sleeve shirt and unusual smelling smoke escapes from the vehicle. He is not able to stay awake but is able to answer your questions. The sleeve of his shirt slides up and you notice red marks on his arms. He has no Horizontal Gaze Nystagmus and no Vertical Nystagmus. As the driver is performing the walk and turn and one leg stand tests, his movements are slow and deliberate. Administration of the Romberg test disclosed that the subject has a slow internal clock. His eyes are reddish and pupils appear to be normal.

Scenario IV

On a Saturday evening following a concert, you stop a vehicle for speeding (70 in a 35). During the initial conversation with the subject you notice that she is talking very rapidly, has extremely large pupils and is anxious. There is no odor of an alcoholic beverage on this person's breath. As you administer the standardized field sobriety tests, you observe that there is no Horizontal Gaze Nystagmus and no Vertical Nystagmus. As the driver is performing the walk and turn and one leg stand, her movements are fast. Administration of the Romberg test discloses that the subject has a fast internal clock and muscle tremors.

Scenario V

You receive a call to back-up a fellow officer who has stopped a vehicle and is now wrestling with the operator. Upon arrival, you observe that the subject is naked (the temperature is 30 degrees). He appears to be somewhat cooperative but non-communicative. There is no odor of alcoholic beverage on this person's breath. As you administer the standardized field sobriety tests, you observe that there is Horizontal Gaze Nystagmus with immediate onset and Vertical Nystagmus. As the driver is performing the walk and turn and one leg stand tests, his movements are slow and rigid. He was having difficulty dividing attention. Administration of the Romberg test discloses that the subject has a slow internal clock. His skin is warm to the touch.

Scenario VI

You have responded to a one car property damage crash. In your initial conversation with the operator you observe him to be drowsy. There is no odor of alcoholic beverage on this person's breath. As you administer the standardized field sobriety tests, you observe that there is Horizontal Gaze Nystagmus and Vertical Nystagmus. As the driver is performing the walk and turn and one leg stand, his movements are slow and his muscle tone appears flaccid. Administration of the Romberg test discloses that the subject has a slow internal clock. The subject's pupils appeared normal in size.

Scenario VII

You receive a call to assist an officer and he explains that he stopped the vehicle for obvious driving impairment. The driver displayed numerous clues and indicators of impairment during the SFSTs. However, he did not exhibit Horizontal Gaze Nystagmus nor Vertical Nystagmus. Larger than normal pupils and noticeable fluttering eyelids during the Romberg were detected. His internal clock was slowed to 60 seconds. The whites of his eyes appeared reddish. He seems totally unconcerned with the thought of possibly being arrested.

Scenario VIII

You stop a vehicle for running a red light. As you observe the driver, he is slow to respond, perspiring, and is easily agitated. As the subject is performing the walk and turn and one leg stand, you observe that the subject is very rigid and is having a difficult time dividing attention. He has Horizontal Gaze Nystagmus and Vertical Nystagmus. His eyes are reddish and pupils are larger than normal. Administration of the Romberg test disclosed that the subject has a distorted internal clock.